

Scanned by AGOSTINETTI, JENNIFER L. CCA in f... HUNTSVILLE (HV) on 08/09/2011 13:17

Attachment A

Policy A-11.1

DEATH SUMMARY

Offender Name:	Martone, Michael
TDCJ #:	1395315
Date of Admission:	12/01/2006
Date of Incarceration:	10/26/2006
Date and Hour of Death:	08/08/2011 @ 10:22pm
Facility of Assignment:	Huntsville Facility
Place of Death:	Hermann Memorial Hospital Dr. Libby George
Reviewer:	Abbas Khoshdel, MD

Brief Summary of Medical History and Physical Examination: 57 year old white male, h/o depression, mild intermittent asthma, HTN, HLD, CAD, HCV, Seizure, and MORBID OBESITY, because of uncontrolled HTN was referred to cardiology on 4/20/11.

Outpatient Course: On 08/08/11 at approximately 2000 Sgt. Roundtree responded to G-1-4 cell where offender Martone #1395315 was complaining of dizziness and shortness of breath. Upon arriving at the cell, Sgt. Roundtree found offender Martone conscious and alert. As Sgt. Roundtree began moving the offender from his cell to medical the offender became unresponsive. Sgt. Roundtree initiated ICS and Lt. Proctor responded along with officer Ellis and Quick. Offender Martone was placed on a backboard and taken out of the building to a gurney that was waiting outside. The radio picket officer contacted 911 and EMS was activated. The offender was moved to the Huntsville Unit Infirmary to wait for EMS to arrive. While in the infirmary, Lt. Proctor noticed that the offender was very warm to the touch and applied ice packs to the offender. EMS arrived and began treating the offender. A decision was made by EMS to transport the offender the Huntsville Municipal Airport where he would be transported by Life Flight Helicopter. The ambulance left the unit at 2045 and the life flight helicopter left the airport at approximately 2115. The offender was transported to Hermann Memorial Hospital in Houston, Texas where he lost all vital signs and CPR was started at 2203. At 2222 offender Martone was pronounced deceased by Dr. Libby George. Officer Bake notified Lt. Simmons of the death at 2235. Officer Bake was told by Hermann Memorial Staff that the offender may have died as a result of heat and that the offender's temperature was 108. The Huntsville Unit reported the temperature to be 102, humidity 20% and heat index 99 at 1900.

Emergency Room Visit(s): Dead on Arrival to Hermann Hospital ER

Inpatient Course(s): None

Current Medications:

Ecotrin EC 325MG, 1 tabs oral QD
Vasotec 20MG, 1 tabs oral BID
Motrin 800MG, 1 tabs oral BID
Imdur 60MG, 1 tabs oral QD
Lopressor 100MG, 1 tabs oral BID
Lopressor 50MG, 1 tabs oral BID; *Special Instructions:* Take total of 150mg Lopressor/Metoprolol 2 X each day

1 | Page (Martone #1395315)

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Loniten 10MG, 1 tabs oral BID
Niaspan 500MG, 1 tabs oral daily
Nitrostat 0.4MG, 1 tabs sublingual SL NTG *Special Instructions:* If chest pain not relieved in 15 minutes call medical.
Pamelor 50MG, 4 caps oral QAM
Prilosec 20MG, 1 caps oral QAM
Dilantin 100MG, 3 caps oral QD
Plavix * 75MG, 1 tabs oral daily *Special Instructions:* S/P ANGIOPLASTY, [INDEF]
Artificial Tears Eye Drop 1.4%, 2 % Ophthalmic BID
Inderal 40MG, 1 tabs oral TID
Zantac 150MG, 1 tabs oral BID
Kenalog 0.1% CREAM 1LB 0.1%, 1 applies topically BID *Special Instructions:* Apply thin layer sparingly.
Apresoline 50MG, 2 tabs oral TID
Hydrodiuril 25MG, 1 tabs oral QD

Terminal Event: possible heat stroke

Autopsy Findings: Autopsy pending

MD Signature: abbaskhoshdelmd
8/9/11

Date:

2 | Page (Martone #1395315)

3.44

**CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING**

Patient Name: MARTONE, MICHAEL D **TDCJ#:** 1395315 **Date:** 08/08/2011 21:34 **Facility:** HUNTSVILLE (HV)

Age: 57 year **Race:** W **Sex:** male

Most recent vitals from 8/2/2011: BP: 159 / 91 (Sitting) ; Wt: 309 Lbs.; Height: 74 In.; Pulse: 74 (Sitting) ; Resp: 20 / min; Temp: 95 (Oral)

Allergies: HMG-COA REDUCTASE INHIBITORS

Patient Language: ENGLISH **Name of interpreter, if required:**

Current Medications:

ECOTRIN EC 325MG, 1 TABS ORAL QD

VASOTEC 20MG, 1 TABS ORAL BID

MOTRIN 800MG, 1 TABS ORAL BID

IMDUR 60MG, 1 TABS ORAL QD

LOPRESSOR 100MG, 1 TABS ORAL BID

LOPRESSOR 50MG, 1 TABS ORAL BID

Special Instructions: TAKE TOTAL OF 150 MG LOPRESSOR / METORPOLOL 2 X EACH DAY

LONITEN 10MG, 1 TABS ORAL BID

NIASPAN 500MG, 1 TABS ORAL DAILY

NITROSTAT 0.4MG, 1 TABS SUBLINGUAL SL NTG

Special Instructions: IF CHEST PAIN NOT RELIEVED IN 15 MINUTES CALL MEDICAL.

PAMELOR 50MG, 4 CAPS ORAL QAM

PRILOSEC 20MG, 1 CAPS ORAL QAM

DILANTIN 100MG, 3 CAPS ORAL QD

PLAVIX * 75MG, 1 TABS ORAL DAILY

Special Instructions: S/P ANGIOPLASTY, [INDEF]

ARTIFICIAL TEARS EYE DROP 1.4%, 2 % OPHTHALMIC BID

INDERAL 40MG, 1 TABS ORAL TID

ZANTAC 150MG, 1 TABS ORAL BID

KENALOG 0.1% CREAM 1LB 0.1%, 1 APPLICS TOPICALLY BID

Special Instructions: APPLY THIN LAYER SPARINGLY.

APRESOLINE 50MG, 2 TABS ORAL TID

HYDRODIURIL 25MG, 1 TABS ORAL QD

SCR INITIATED?		YES	Date Received:
	x	NO	

Today's Problem:

1840

S: RECEIVED CALL FROM SGT FORD, PT C/O SOB.

1850

O: VIEWED PT ON DMS. HE IS ALERT & SITTING UPRIGHT ON A CHAIR W/O DISTRESS. AFFECT IS CALM. HIS RESPIRATIONS ARE EVEN AND UNLABORED. HIS COLOR IS WNL. HIS SPEECH IS CLEAR. HE SPEAKS IN MULTI-WORD SENTENCES W/O HESITATION OR BREATHLESSNESS. HE C/O SOB AND DRY MOUTH THAT BEGAN THIS AFTERNOON AROUND 2PM THAT IS INTERMITTENT. HE DOESN'T REPORT PAIN OR DISCOMFORT. HE DENIES COUGH OR NASAL CONGESTION.

A: NA

Plan is as follows: ADVISED TO REST AND RELAX AS MUCH AS POSSIBLE. ALSO TO INCREASE HIS

1 of 2

3.4.15

**CORRECTIONAL MANAGED CARE
CLINIC NOTES - NURSING**

Patient Name: MARTONE, MICHAEL D **TDCJ#:** 1395315 **Date:** 08/08/2011 21:34 **Facility:**
HUNTSVILLE (HV)
**WATER INTAKE AND DRINK WATER EVERY HOUR THAT HE IS AWAKE. IF SX'S DON'T IMPROVE OR IF
THEY WORSEN TO NOTIFY SECURITY AND HE WILL BE RE-EVALUATED ON DMS AT THAT TIME. HE
VERBALIZED UNDERSTANDING AND AGREEMENT TO THE P.O.C.**

Electronically Signed by RYE, PATRICIA A. R.N. on 08/08/2011.
##And No Others##

?	Problem Description	Category / Subcategory	Group
	PRURITUS AND RELATED CONDITIONS	\	PRIMARY
	OPTOMETRY SERVICES	OPTOMETRY \	PRIMARY
	HYPERLIPIDEMIA	\	PRIMARY
	DERMATITIS NOS	\	PRIMARY
	PRE-SEG/LOCK-UP/UOF PHYSICAL EXAM	\	PRIMARY
	MSSA, METH SUSCEPTIBLE STAPH AUREUS	\	PRIMARY
	HEPATITIS B VACCINE	\	PRIMARY
	NONCOMPLIANCE WITH TREATMENT	\	PRIMARY
	MILD INTERMITTENT ASTHMA	CHRONIC CARE \	PRIMARY
	MENTAL HEALTH PSYCHIATRIC TARGET SYMPTOMS	\	PRIMARY
	MENTAL HEALTH COUNSELING PROBLEMS & TRMT OBJECTIVES	MENTAL HEALTH \	PRIMARY
	POSTTRAUMATIC STRESS DISORDER	MENTAL HEALTH \	PRIMARY
	HYPERTENSION (HTN) - CCC	CHRONIC CARE \	PRIMARY
	VARICELLA, IMMUNITY	\	PRIMARY
	DIAGNOSIS OR CONDITION DEFERRED ON AXIS I	MENTAL HEALTH \	PRIMARY
	BRIEF PSYCHIATRIC RATING SCALE	\	PRIMARY
	HEPATITIS C (HEP C) - CCC	CHRONIC CARE \	PRIMARY
	MENTAL STATUS EXAM	\	PRIMARY
	CORONARY ATHEROSCLEROTIC DISEASE (CAD) - CCC	CHRONIC CARE \	PRIMARY
	SEIZURE DISORDER - CCC	CHRONIC CARE \	PRIMARY
	MEDICAL CARS 3	CARS \	PRIMARY
	TB CLASS 2 (INFECTION, NO DISEASE PULM. TUBERCULOSIS)	\	PRIMARY

?	ICD-9	First Observed	Status	Problem ID
	698.	06/28/2010 06:...	ACTIVE	131466784
	V65.1	07/14/2010 10:...	ACTIVE	132126372
	272.4	07/27/2010 12:...	ACTIVE	132616262
	692.9	05/02/2007 07:...	ACTIVE	72175429
	V70.51	07/11/2007 05:...	ACTIVE	74176340
	E845.9	09/20/2007 08:...	ACTIVE	78510945
	V70.01	10/25/2007 14:...	INACTIVE	80731427
	V15.81	10/26/2007 10:...	INACTIVE	80779119
	493.1	12/13/2007 13:...	ACTIVE	83621548
	MHPTS	12/18/2006 08:...	ACTIVE	62226614
	MHCPTO	12/28/2006 13:...	ACTIVE	62791600
	309.81	12/18/2006 08:...	INACTIVE	85237734
	401.1	10/31/2006 08:...	ACTIVE	59599915
	052.9	10/31/2006 13:...	INACTIVE	59640765
	799.9	10/26/2006 14:...	INACTIVE	59616187
	MHBPRS	10/31/2006 09:...	ACTIVE	59610682
	070.51	10/31/2006 08:...	ACTIVE	59599912
	MHSE	11/06/2006 11:...	ACTIVE	59954257
	414.0	10/31/2006 08:...	ACTIVE	59599882
	780.39	10/31/2006 08:...	ACTIVE	59599917
	MC3	10/31/2006 08:...	ACTIVE	59599919
	011.2	10/31/2006 06:...	INACTIVE	59594993

?	Problem Description	Category / Subcategory	Group
	MENTAL HEALTH BEHAVIORAL OBSERVATIONS	MENTAL HEALTH \	PRIMARY
	DENTAL CARS 1	\	PRIMARY
	BACKACHE	\	PRIMARY
	MENTAL HEALTH CARS 2	CARS \	PRIMARY
	SKIN ILLNESS	\	PRIMARY
	MAJOR DEPRESSIVE DISORDER, RECURRENT, SEVERE WITH PSYCHOTIC FEA...	\	PRIMARY
	BRIEF PHYSICAL EXAM	\	PRIMARY
	KNEE PAIN	\	PRIMARY
	CID ASSESSMENT	CID \	PRIMARY
	DEPRESSIVE DISORDER NOS	MENTAL HEALTH \	PRIMARY
	OBSERVATION- COND NOT FOUND	\	PRIMARY
	EXAMINATION FOR NORMAL COMPARISON OR CONTROL IN CLINICAL RESEAR...	\	PRIMARY
	SCREENING EXAM FOR SUSPECTED CONDITION	\	PRIMARY
	CATARACT NOS	\	PRIMARY

?	ICD-9	First Observed	Status	Problem ID
	MHBO	11/17/2006 10:...	ACTIVE	60624844
	DC1	12/04/2006 14:...	ACTIVE	61483179
	724.5	02/26/2007 09:...	ACTIVE	66234632
	MHC2	03/15/2007 16:...	ACTIVE	67369825
	709.9	07/24/2008 08:...	ACTIVE	98206984
	296.34	10/31/2006 10:...	ACTIVE	119371661
	V70.6	08/25/2009 08:...	ACTIVE	120014350
	782.8	11/18/2009 09:...	ACTIVE	123388813
	CID ASMT	10/21/2009 12:...	INACTIVE	122304466
	311	02/08/2010 09:...	ACTIVE	126232196
	V71	03/22/2010 13:...	ACTIVE	127798566
	V70.7	03/19/2011 11:...	ACTIVE	141341312
	V82.6	04/18/2011 13:...	ACTIVE	142470882
	366.9	08/02/2011 15:...	ACTIVE	146388906

MARTONE, MICHAEL D
Medications 08/10/2011 10:34

ALLERGIES

Allergy	Reaction:	Severity:
Comment		
Reaction	Status	Deletion Reason
Deleted Date		
HMG-COA REDUCTASE INHIBITORS		UNKNOWN
myalgia		

&Active MEDICATIONS

APRESOLINE 50MG TABS 2 TABS ORAL TID 03/29/2011 13:28 #180
 ARTIFICIAL TEARS EYE DROP 1.4% DROPS 2 DROPS OPHTHALMIC BID 04/09/2011 12:07 #120
 DILANTIN 100MG CAPS 3 CAPS ORAL QD 10/21/2010 10:48 #90
 ECOTRIN EC 325MG TABS 1 TABS ORAL QD 04/04/2011 07:58 #30
 HYDRODIURIL 25MG TABS 1 TABS ORAL QD 03/29/2011 13:29 #30
 IMDUR 60MG TABS 1 TABS ORAL QD 09/23/2010 08:09 #30
 INDERAL 40MG TABS 1 TABS ORAL TID 10/21/2010 10:46 #90
 KENALOG 0.1% CREAM 1LB 0.1% APPLICS 1 APPLICS TOPICALLY BID 08/02/2011 15:04 #180
Special Instructions: APPLY THIN LAYER SPARINGLY.
 LONITEN 10MG TABS 1 TABS ORAL BID 09/23/2010 08:08 #60
 LOPRESSOR 100MG TABS 1 TABS ORAL BID 03/29/2011 13:27 #60
 LOPRESSOR 50MG TABS 1 TABS ORAL BID 04/02/2011 07:15 #60
Special Instructions: TAKE TOTAL OF 150 MG LOPRESSOR / METORPOLOL 2 X EACH DAY
 MOTRIN 800MG TABS 1 TABS ORAL BID 06/28/2011 15:43 #60
 NIASPAN 500MG TABS 1 TABS ORAL DAILY 01/13/2011 08:19 #30
 NITROSTAT 0.4MG TABS 1 TABS SUBLINGUAL SL NTG 12/13/2010 13:29 #1
Special Instructions: IF CHEST PAIN NOT RELIEVED IN 15 MINUTES CALL MEDICAL.
 PAMELOR 50MG CAPS 4 CAPS ORAL QAM 08/17/2010 10:53 #120
 PLAVIX * 75MG TABS 1 TABS ORAL DAILY 12/14/2010 13:02 #30
Special Instructions: S/P ANGIOPLASTY, [INDEF]
 PRILOSEC 20MG CAPS 1 CAPS ORAL QAM 02/02/2011 09:18 #30
 VASOTEC 20MG TABS 1 TABS ORAL BID 03/29/2011 13:29 #60
 ZANTAC 150MG TABS 1 TABS ORAL BID 06/28/2011 15:43 #60

2.5

Lab data imported from UTMB - Goston; Performed by UTMB/TDCJ - Regional

Medical Facility Lab

Huntsville, TX 77340 - Telephone Number (936) 291-4200 Ext: 3804

Patient Name : MARTONE, MICHAEL D,
 Patient Id : 1395315
 Patient Phone :
 Date of Birth : XXXXXXXXXX
 SS# : XXXXXXXXXX Sex : Male

Ordering
 Physician : KHOSHDEL, ABBAS
 Facility : HUNTSVILLE (HV)
 815 12TH ST
 HUNTSVILLE TX 77340

Test Name	Result	ABN Flag	Unit	Reference Range
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Accession: 0001120001082 Requisition: C29239628002
 Drawn: 07/19/11 04:10 Received: 07/19/11 11:42 Reported: 07/19/11 14:28

Procedure: E CMP				
SODIUM SERUM	144		MMOL/L	135-145
POTASSIUM SERUM	3.1	L	MMOL/L	3.5-5.0
CHLORIDE SERUM	111	H	MMOL/L	98-108
CARBON DIOXIDE	18	L	MMOL/L	23-31
ANION GAP	15			2-16
BLOOD UREA NITROGEN	13		MG/DL	7-23
GLUCOSE	116	H	MG/DL	70-110
CREATININE	0.86		MG/DL	0.60-1.25
TOTAL BILIRUBIN	0.6		MG/DL	0.1-1.1
CALCIUM	8.8		MG/DL	8.6-10.6
TOTAL PROTEIN	7.6		G/DL	6.0-8.0
ALBUMIN	4.2		G/DL	3.5-5.0
ALKALINE PHOSPHATASE	96		U/L	34-122
ALANINE AMINOTRANSFERASE	77	H	U/L	9-51
ASPARTATE AMINOTRANSFERASE	85	H	U/L	13-40

L Low, H High, C Critical, * Abnormal Alpha

Print Date: 07/19/2011 14:38

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Electronically Signed by KHOSHDEL, ABBAS M.D. on 07/20/2011.

##And No Others##

3.5B

Lab data imported from UTMB - G^oston; Performed by UTMB/TDCJ - Regional

Medical Facility Lab

Huntsville, TX 77340 - Telephone Number (936) 291-4200 Ext: 3804

Patient Name : MARTONE, MICHAEL D,
 Patient Id : 1395315
 Patient Phone :
 Date of Birth : [REDACTED]
 SS# : [REDACTED] Sex : Male

Ordering
 Physician : KHOSHDEL, ABBAS
 Facility : HUNTSVILLE (HV)
 815 12TH ST
 HUNTSVILLE TX 77340

Test Name	Result	ABN Flag	Unit	Reference Range
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Accession: 0001120001082 Requisition: C29239628005
 Drawn: 07/19/11 04:10 Received: 07/19/11 11:42 Reported: 07/19/11 14:28

Procedure: E LIPIDS

CHOLESTEROL	256	H	MG/DL	120-200
TRIGLYCERIDE	170		MG/DL	30-170
HIGH DENSITY LIPOPROTEIN	40		MG/DL	30-70
LOW DENSITY LIPOPROTEIN CHOL	182	H	MG/DL	<160
HDL CHOLESTEROL RATIO	6.4	H		<5.0
VLDL	34		MG/DL	10-60

L Low, H High, C Critical, * Abnormal Alpha

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##And No Others##

MSJ

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Medical Facility Lab

Huntsville, TX 77340 - Telephone Number (936) 291-4200 Ext: 3804

Patient Name : MARTONE, MICHAEL D,
 Patient Id : 1395315
 Patient Phone :
 Date of Birth :
 SS# : Sex : Male

Ordering
 Physician : RUBY, D
 Facility : HUNTSVILLE (HV)
 815 12TH ST
 HUNTSVILLE TX 77340

Test Name	Result	ABN Flag	Unit	Reference Range
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Accession: 0001120001082 Requisition:
 Drawn: 07/19/11 04:10 Received: 07/19/11 11:42 Reported: 07/19/11 14:56

Procedure: E UA MICRO		
MICROSCOPIC EXAM DONE?	DONE	
SQUAMOUS EPITHELIAL CELLS	FEW	
BACTERIA	MODERATE	*
MUCOUS	MODERATE	

L Low, H High, C Critical, * Abnormal Alpha

3.86

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##And No Others##



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Medical Facility Lab

Huntsville, TX 77340 - Telephone Number (936) 291-4200 Ext: 3804

Patient Name : MARTONE, MICHAEL D,
 Patient Id : 1395315
 Patient Phone :
 Date of Birth : [REDACTED]
 SS# : [REDACTED] Sex : Male

Ordering
 Physician : KHOSHDEL, ABBAS
 Facility : HUNTSVILLE (HV)
 815 12TH ST
 HUNTSVILLE TX 77340

Test Name	Result	ABN Flag	Unit	Reference Range
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Accession: 0001120001082 Requisition: C29239628004
 Drawn: 07/19/11 04:10 Received: 07/19/11 12:39 Reported: 07/19/11 14:56

Procedure: E UA CHEM

COLOR	AMBER	*		
APPEARANCE	CLEAR			
URINE SPECIFIC GRAVITY	1.025			
URINE PH	6.5			5.5-7.0
URINE PROTEIN	TRACE	*		NEGATIVE
URINE GLUCOSE, QUALITATIVE	NEGATIVE			NEGATIVE
URINE KETONES	NEGATIVE			NEGATIVE
URINE BILIRUBIN	SMALL	*		NEGATIVE
URINE BLOOD	NEGATIVE			NEGATIVE
URINE NITRITE	NEGATIVE			NEGATIVE
URINE UROBILINOGEN	2.0EU/DL	*		<=1.0
REFERENCE UNITS FOR URINE UROBILINOGEN	= EU/DL			
URINE LEUKOCYTE ESTERASE	NEGATIVE			NEGATIVE

L Low, H High, C Critical, * Abnormal Alpha

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##And No Others##

2.51

Lab data imported from UTMB - Goston; Performed by UTMB/TDCJ - Regional

Medical Facility Lab

Huntsville, TX 77340 - Telephone Number (936) 291-4200 Ext: 3804

Patient Name : MARTONE, MICHAEL D,
 Patient Id : 1395315
 Patient Phone :
 Date of Birth : [REDACTED]
 SS# : [REDACTED] Sex : Male

Ordering
 Physician : KHOSHDEL, ABBAS
 Facility : HUNTSVILLE (HV)
 815 12TH ST
 HUNTSVILLE TX 77340

Test Name	Result	ABN Flag	Unit	Reference Range
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Accession: 0001120001082 Requisition: C29239628001
 Drawn: 07/19/11 04:10 Received: 07/19/11 11:42 Reported: 07/19/11 13:57

Procedure: E ADIFF				
GRANULOCYTE PERCENT	48.3		%	45.0-78.0
LYMPH PERCENT	32.6		%	20.0-51.0
MONOCYTE PERCENT	13.0	H	%	4.0-12.0
EOSINOPHIL PERCENT	5.7		%	0.0-6.0
BASOPHIL PERCENT	0.4		%	0.0-2.0
GRANULOCYTES ABSOLUTE	2.4		/CMM	2.1-7.4
LYMPHOCYTE ABSOLUTE	1.6		/CMM	1.3-4.4
MONOCYTE ABSOLUTE	0.6		/CMM	0.2-0.9
EOSINOPHILS ABSOLUTE	0.3		/CMM	0.0-0.4
BASOPHILS ABSOLUTE	0.0		/CMM	0.0-0.2

L Low, H High, C Critical, * Abnormal Alpha

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##And No Others##

7/6/1

Lab data imported from UTMB - G: ston; Performed by UTMB/TDCJ - Regional

Medical Facility Lab

Huntsville, TX 77340 - Telephone Number (936) 291-4200 Ext: 3804

Patient Name : MARTONE, MICHAEL D,
 Patient Id : 1395315
 Patient Phone :
 Date of Birth :
 SS# : Sex : Male

Ordering
 Physician : KHOSHDEL, ABBAS
 Facility : HUNTSVILLE (HV)
 815 12TH ST
 HUNTSVILLE TX 77340

Test Name	Result	ABN Flag	Unit	Reference Range
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Accession: 0001120001082 Requisition: C29239628001
 Drawn: 07/19/11 04:10 Received: 07/19/11 11:42 Reported: 07/19/11 13:57

Procedure: E HEME P				
WHITE BLOOD CELL COUNT	4.9		/CMM	4.5-10.5
RED BLOOD CELL COUNT	5.13		/CMM	4.25-5.65
HEMOGLOBIN	16.0		G/DL	13.5-17.0
HEMATOCRIT	44.1		%	37.0-50.0
MEAN CORPUSCULAR VOLUME	86.0		FL	82.0-97.0
MEAN CORPUSCULAR HGB	31.2		PG	27.0-33.0
MEAN CORP HGB CONCENTRATION	36.3	H	%	31.0-36.2
RED CELL DISTRIBUTION WIDTH	14.0		%	11.8-14.1
PLATELET COUNT	212		/CMM	150-400
MEAN PLATELET VOLUME	13.7	H	FL	7.8-11.2

L Low, H High, C Critical, * Abnormal Alpha

3.62

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##And No Others##

7.63

Lab data imported from UTMB - G. [redacted] ston; Performed by UTMB/TDCJ - Regional

Medical Facility Lab

Huntsville, TX 77340 - Telephone Number (936) 291-4200 Ext: 3804

Patient Name : MARTONE, MICHAEL D,
 Patient Id : 1395315
 Patient Phone :
 Date of Birth : [redacted]
 SS# : [redacted] Sex : Male

Ordering
 Physician : RUBY, D
 Facility : HUNTSVILLE (HV)
 815 12TH ST
 HUNTSVILLE TX 77340

Test Name	Result	ABN Flag	Unit	Reference Range
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Accession: 0001120001082 Requisition: C29318650006
 Drawn: 07/19/11 04:10 Received: 07/19/11 11:42 Reported: 07/19/11 14:28

Procedure: E PHYT
 DILANTIN 6.4 UG/ML
 THERAPEUTIC RANGE: 10 - 20 UG/ML
 TOXIC RANGE: > 20 UG/ML

L Low, H High, C Critical, * Abnormal Alpha

3.64

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Electronically Signed by RUBY, D A. NP on 07/20/2011.

##And No Others##

7.65

**CORRECTIONAL MANAGED CARE
OUTPATIENT MENTAL HEALTH SERVICES**

Outpatient Clinical Interview (Psychologist/Psychotherapist)

Patient Name: MARTONE, MICHAEL D **TDCJ#:** 1395315 **Date:** 05/27/2011

12:18 Facility: HUNTSVILLE (HV)

Age: 56 **Race:** W **Sex:** male

Patient Language: ENGLISH **Name of interpreter, if required:**

Most recent vitals from 5/16/2011: BP: 181 / 114 (Sitting) ; Wt: 314 Lbs.; Height: 74 In.; Pulse: 74 (Sitting) ; Resp: 20 / min; Temp: 95.9 (Oral)

Allergies: HMG-COA REDUCTASE INHIBITORS

Current Medications:

ECOTRIN EC 325MG, 1 TABS ORAL QD

VASOTEC 20MG, 1 TABS ORAL BID

MOTRIN 800MG, 1 TABS ORAL BID

IMDUR 60MG, 1 TABS ORAL QD

LOPRESSOR 100MG, 1 TABS ORAL BID

LOPRESSOR 50MG, 1 TABS ORAL BID

Special Instructions: TAKE TOTAL OF 150 MG LOPRESSOR / METORPOLOL 2 X EACH DAY

LONITEN 10MG, 1 TABS ORAL BID

NIASPAN 500MG, 1 TABS ORAL DAILY

NITROSTAT 0.4MG, 1 TABS SUBLINGUAL SL NTG

Special Instructions: IF CHEST PAIN NOT RELIEVED IN 15 MINUTES CALL MEDICAL.

PAMELOR 50MG, 4 CAPS ORAL QAM

PRILOSEC 20MG, 1 CAPS ORAL QAM

DILANTIN 100MG, 3 CAPS ORAL QD

PLAVIX * 75MG, 1 TABS ORAL DAILY

Special Instructions: S/P ANGIOPLASTY, [INDEF]

ARTIFICIAL TEARS EYE DROP 1.4%, 2 % OPTHALMIC BID

INDERAL 40MG, 1 TABS ORAL TID

ZANTAC 150MG, 1 TABS ORAL BID

APRESOLINE 50MG, 2 TABS ORAL TID

HYDRODIURIL 25MG, 1 TABS ORAL QD

Active Problems: *

Cars:

Medical Cars 3 First Observed 10/31/2006 08:02AM

Mental Health Cars 2 First Observed 3/15/2007 04:45PM

Chronic Care:

Hepatitis C (hep C) - Ccc First Observed 10/31/2006 08:01AM

Coronary Atherosclerotic Disease (cad) - Ccc First Observed 10/31/2006 08:01AM

Seizure Disorder - Ccc First Observed 10/31/2006 08:02AM

Hypertension (htn) - Ccc First Observed 10/31/2006 08:02AM

Mild Intermittent Asthma First Observed 12/13/2007 01:36PM

Mental Health:

Mental Health Behavioral Observations First Observed 11/17/2006 10:36AM

Mental Health Counseling Problems & Trmt Objectives First Observed 12/28/2006 01:11PM

Depressive Disorder Nos First Observed 2/8/2010 09:35AM

Optometry:

Optometry Services First Observed 7/14/2010 10:43AM

File

**CORRECTIONAL MANAGED CARE
OUTPATIENT MENTAL HEALTH SERVICES**

Outpatient Clinical Interview (Psychologist/Psychotherapist)

Patient Name: MARTONE, MICHAEL D **TDCJ#:** 1395315 **Date:** 05/27/2011

12:18 Facility: HUNTSVILLE (HV)

Not Specified:

Physical Examination First Observed 10/31/2006 08:01AM
Brief Psychiatric Rating Scale First Observed 10/31/2006 09:33AM
Major Depressive Disorder, Recurrent, Severe With Psychotic Features First Observed
10/31/2006 10:11AM
Mental Status Exam First Observed 11/6/2006 11:38AM
Dental Cars 1 First Observed 12/4/2006 02:19PM
Mental Health Psychiatric Target Symptoms First Observed 12/18/2006 08:55AM
Backache First Observed 2/26/2007 09:12AM
Dermatitis Nos First Observed 5/2/2007 07:23AM
Pre-seg/lock-up/uof Physical Exam First Observed 7/11/2007 05:54AM
Mssa, Meth Susceptible Staph Aureus First Observed 9/20/2007 08:08AM
Skin Illness First Observed 7/24/2008 08:08AM
Brief Physical Exam First Observed 8/25/2009 08:37AM
Knee Pain First Observed 11/18/2009 09:16AM
Observation- Cond Not Found First Observed 3/22/2010 01:15PM
Pruritus And Related Conditions First Observed 6/28/2010 06:31AM
Hyperlipidemia First Observed 7/27/2010 12:24PM
Examination For Normal Comparison Or Control In Clinical Research First Observed
3/19/2011 11:37AM
Screening Exam For Suspected Condition First Observed 4/18/2011 01:55PM

Seen this date at (time): 1125

S: Offender seen for Clinical Interview as referred by:

☐ Results of Intake and Transfer Mental Health Screening

☐ Results of the Intake Mental Health Appraisal

☒ Mental Health Sick Call/Referral Triage **Date received:** 05.27.2011

☐ Staff Referral

☒ Reason for interview and limits of confidentiality were explained to the offender prior to the interview. Informed consent has been obtained and documented in this record.

Reason for referral/presenting problem (if SCR state problem on request):

"For over 4 years I was seen every month to share with Mrs. Polman. Since she left no one has layed me in for my regular monthly meeting. Is there anyone that I can talk to? If not, what should I do. Sometimes I really struggle around here. I am really struggle around here. I am really struggling today.

Information from clinical interview: The patient entered the office appropriately dressed. He reports that he is functioning well and doesn't need any changes in his medication at this time. He states that there are concerns at home with the family but out of his control. He was informed that he will be seen once this writer gets to his name. He was advised of the process of seeing the patients on the caseload. At this

**CORRECTIONAL MANAGED CARE
OUTPATIENT MENTAL HEALTH SERVICES**

Outpatient Clinical Interview (Psychologist/Psychotherapist)

Patient Name: MARTONE, MICHAEL D **TDCJ#:** 1395315 **Date:** 05/27/2011

12:18Facility: HUNTSVILLE (HV)

time of transition. He reports that he does understand and would wait for a lay-in. He denies suicidal ideation and intent.

O: Mental Status Exam (may use decision tree)

Calm, cooperative and responsive; neat and clean in white state issued uniform; alert and oriented x4; appropriate eye contact; speech-clear and concise with normal tone, rate and volume; no thoughts or plans of suicide noted or voiced; no evidence of psychotic symptoms exhibited; rational and coherent; euthymic with appropriate affect.

A: Diagnostic Impression

Axis I: Depressive Disorder NOS (311.0)

Axis II:

P:

Is CARS Current? Yes

- ☐ No further intervention indicated at this time. Access to care procedure explained to Offender.
☐ Refer offender to or consultation with other treatment staff.
☐ Transfer offender to:
☐ Crisis management/inpatient care, DDP, PAMIO or other mental health facility or program
☐ Outpatient mental health observation
☐ Schedule for MHE
☒ Continue to be seen as scheduled
☐ Reschedule x

Procedures Ordered:

MH OP ASSESSMENT/EVALUATION: depressive disorder nos, mental health cars 2

Electronically Signed by HAYNES, SHERRY J. MA, LPC, MHM
on 05/27/2011.

##And No Others##

7.68

Scanned by AGOSTINETTI, JENNIFER L., CCA in Ja. JUNTSVILLE (HV) on 07/08/2011 12:49

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
INSTITUTIONAL DIVISION
HEALTH SERVICES

REFUSAL OF TREATMENT OR SERVICES

I, MARTONE, MICHAEL D., TDCJ-ID Number: 1395315 decline the following services and treatments at the Texas Department of Criminal Justice - Institutional Division:

ref. to see/ wait for Dr. apt.

I understand the above documented treatment being refused is for the following condition(s):

Rt Kidney pain

I understand that potential outcome(s) for refusing the treatment for the above documented condition(s) includes but is not limited to the following: Worsening of symptoms

a death

I do not wish to have this above stated treatment or services. I assume full responsibility for any and all consequences or personal inconvenience that may arise from refusal of services.

I understand that I may still request these or similar services in the future.

Michael Martone 1395315
Signature of Inmate/TDCJ -ID # Date

Signature of Witness (if offender unable or unwilling to sign) Date

Reason unable to sign:

I certify that the above named individual is alert and appears to understand the above listed information.

[Signature] 7/7/11
Signature and Title of Medical Personnel Obtaining Refusal Date

I certify that the above named patient is alert and oriented and has demonstrated comprehension of the above explained condition, treatment, and potential consequences.

X



#

3.69

OFFENDER DEATH NOTIFICATION WORKSHEET

To: Warden Jones Date: 08/09/2011
 From: Chaplain L. Hart Subject: Offender Death Notification

1. **Offender Information**

Name: Last Martone First Michael Middle David

TDCJ#: 01395315 Unit Assigned: Huntsville

Cause of Death: Pending

Date of Death: (Unit / 08/08/11

Hospital): Herman Memorial

Certifying Physician / Justice of the Peace: Dr. Libby George

2. **Family Contact: In the event of natural causes of death under a physician or registered nurse's care, the priority family order should be spouse, adult children or guardians of minor children, parents and siblings.**

Date: 08/09/2011 Time: 08:35

XX Contacted listed next of kin.

XXXXXX Contacted a relative/friend from visiting list or correspondence.

XXXXXX Contacted Sheriff's Office / Police Dept. (Specify)

Name: Roxanne Martone Date: 08/09/11 Time: 08:35

Objection to Autopsy by N.O.K. YES NO XXXXX

3. **Person Contacted**

Name: Roxanne Martone Relationship: Daughter

Address/City/St/Zip: 2904 Laurel Ridge, League City, Texas 77536

Area Code and Telephone Number: 713/231/4343

4. **Burial Arrangements**

XXXXX The family **will claim** the body. The family was instructed to contact the Carnes Funeral Home at (409) 986-9900.

XXXXX The family **will not claim** the body. The family was instructed to send fax to (936) 437-2090 to the Huntsville Unit Warden with the following message: "I am unable to claim the body of XXXXX TDCJ# XXXXX. I am requesting that he/she be buried in the prison cemetery." Name, address, telephone number and relationship to the inmate should be included in the fax.

XXXXX **Unable to contact** any family member or friend (detail efforts in IOC to Unit Warden). Send E-Mail and a fax worksheet (936-437-2090) to Huntsville Unit Warden. Burial recommended in the prison cemetery.

5. **XXXXX** Send a copy of this worksheet, IOC, E-Form and the next of kin letter to Director of Chaplains. Unit Warden, Chaplain's unit file

Chaplain's Signature

8-9-11
Date

4.1

Texas Department of Criminal Justice
INSTITUTIONAL DIVISION
Huntsville Unit

Shift Lieutenant / Sergeant
OFFENDER DEATH NOTIFICATION FORM

Date: 8-8-11
Incident Number: I- 11246-08-11
O.I.G. Number: _____

1. In the event of an offender death, this section should be completed prior to any notifications.

Offender Name: Martone, Michael TDCJ #: 1395315
Unit of Assignment: Huntsville Death Occurred: Herman Memorial Houston
Cause of Death: Possible Heart Illness
Certifying Physician: Dr. George, Libby
(Use Physician's Full Name)
Justice of the Peace (if warranted): N/A
Date and Time of Death: 8-8-11 2222
Where the body is being held: Carnes Funeral Home

2. Advise the Certifying Physician that an autopsy is desired.
3. Notifications are to be made as soon after death as is practical:

a. Duty Warden: Warden Jones Time: 2237
b. Senior Warden: Warden Jones Time: 2237
c. Carnes Huntsville Funeral Home: Holly Time: 2359
d. O.I.G.: Kevin Shawacne Time: 2248
e. Chaplain: Larry Hart Time: 2245
f. Region I: Mr Upshaw Time: 2239
g. Emergency Action Center (936) 437-6371 Ext. 1463 or 1448
Person Contacted: K. Crambley Time: 0118
h. Send a copy of the EAC E-Mail to the Director of Classification and Records to LBR3466, a copy of this record to (936) 437-6227.
i. Next of Kin/Relationship: Roxanne Martone / Daughter
Address/Phone Number: 302 Biscayne Blvd El Lago, Tx.

4. Make and Attach a photocopy of the deceased offender's Travel Card.
5. Return original of completed report to the Notification Packet.

Supervisor Signature: [Signature]

Date: 8-9-11 4.2

Texas Department of Criminal Justice
Chaplaincy Department
Huntsville Unit

OFFENDER DEATH TIMELINE

TO: Warden Jones

DATE: 08/09/11

FROM: Larry Hart, Chaplain II

RE: Michael Martone #01395315

Time

22:45

Notified of death by Lieutenant Simmons

I was given the name of the next of kin, a daughter, Roxanne Martone and her telephone number and began to call this number from my cell phone at my home. The daughter's "telephone ring" is a song with the name Roxanne in the song and then the voice mail; with a woman's stating, this is Roxanne Martone please leave a message. I called the number three times until 24:15 and left a voice message twice with my cell phone number to call back.

04:50 I arrive on the unit and called again leaving a voice message with my office phone number to call back.

06:10 Called again leaving a voice message with my office phone number to call back.

06:40 Called again leaving a voice message with my office phone number to call back.

07:10 Called again leaving a voice message with my office phone number to call back.

07:45 Called again leaving a voice message with my office phone number to call back.

08:35

Family Members contacted:


- Roxanne Martone – 713/231/4343
2904 Laurel Ridge
League City, Texas 775306
- She did not object to an autopsy
- The family will claim the body

08:45

Informed Captain Pittman that family members were contacted

10:20

Sent e-form.


Chaplain Hart
Huntsville Unit

Texas Department of Criminal Justice
Autopsy Order

In accordance with Section 501.055 of the Government Code, the following order shall serve as authorization to perform an autopsy on the body of the deceased offender identified below.

Offender Name:	<u>Martone, Michael</u> (Print Name)	TDCJ#:	<u>1395315</u>
Date of Birth:	<u>07/07/54</u>	Race:	<u>White</u> <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Offender Pronounced dead at	<u>10:22:00 PM</u> (Print Time, include am or pm)	on	<u>08/08/11</u> (Print Date, month, date, year)
Location of Death:	<input type="checkbox"/> Unit _____ (Print Unit Name)	<input checked="" type="checkbox"/> Other	<u>Herman Memorial Houston</u> (Print Location, i.e. hospital name)

Acting in my capacity as an authorized official of the Texas Department of Criminal Justice, I hereby order and decree that an autopsy be performed on the body of the above described offender. Said autopsy should be performed to determine the cause of death of the offender who died of natural causes while attended by a physician or registered nurse.

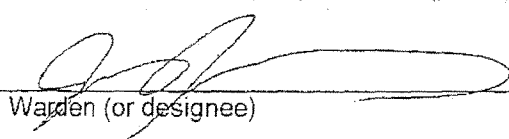
Said Autopsy should include a determination of the cause of death and toxicological examinations of the urine, blood, and other bodily matter as deemed necessary to determine types and amounts of alcohol or drugs if any are present in the body. I further order that said autopsy be performed by UTMB Autopsy Service Physicians and/or Associates.

It is understood that due care shall be taken to avoid unnecessary disfigurement of the body.

Further, said body shall be transported to UTMB (location of autopsy) by a representative or associate of Carnes Funeral Home, located in Texas City, Texas. Upon completion of said autopsy, the body should be relinquished to a representative of the delivering funeral home who can be reached at (Phone Number): 888-822-7637 for transport.

Please forward copy of preliminary findings and reports to:

TDCJ Death Records Technician, Health Services Division
3009 Hwy. 30 West, Room 162
Huntsville, Texas 77340
(936) 437-3631 (phone) (936) 437-3638 (fax)


Warden (or designee)

County Walker
City Huntsville, Texas Zip Code 77340

Texas Department of Criminal Justice

Inter-Office Communications

To Capt CastleberryDate 8/9/2011From Officer K. CollardSubject offender Michael Martone

I officer K. Collard was working G-LINE ON 8/8/11 around 6:30pm Michael Martone TDCS NO 1395315 told me he felt BAD and had been for about a DAY or 2 Throwing up I officer Collard told him to go see medical Now to see what they could do for him the offender was gone for about 30 min and came BACK to the G-LINE TANK I asked him what happened He did not tell me ~~anything~~ anything He did not go BACK to his cell But stayed in the dayroom leaning over talking to himself so I officer Collard sit him on a lockbox around ~~hour~~ Later he fell out I officer Collard called for Sgt Roundtree and the offender was not alert but Breathing Sgt Roundtree me and LT proctor removed him from the cell block for medical attion I officer Collard was told to pack the offenders property after the offender left the unit

K. Collard

8/9/2011

Kerry Collard

WMA att 10-10

Texas Department of Criminal Justice
CORRECTIONAL INSTITUTIONAL DIVISION

Inter-Office Communications

To Lt. M. ProctorDate 8/8/2011From Sgt. C RoundtreeSubject Offender Martone #1395315

On 8/8/2011, I Sergeant Clifton Roundtree responded to a request for a supervisor to G-line from Officer Kerry Collard about 7:30 pm for an offender who he thought was having a seizure. When I arrived the offender was holding on to the window sill with two other offenders assisting him by holding him up. Offender Martone was conscious and appeared to be having what I thought at first to be a seizure also. I asked the offender if he was alright. He responded with a dazed look, but nodded yes. Knowing that the offender would not be able to stand on his own, I requested a wheelchair to take him to the Huntsville Unit Infirmary to be seen by D.M.S. As we waited for the wheelchair, offender Martone started losing consciousness going in and out. So Officer Collard and I sat offender Martone on a locker box for his safety. When we attempted to sit him down, the offender kept holding on to the window sill mumbling sounds like he thought he was falling back, and I told the offender to let go of the windowsill and sit down. Just before the wheelchair arrived, the offender lost all consciousness, so I requested a gurney and a medical board. At this time, I instructed Sergeant Thomas Ford to call 9-1-1. After the medical board arrived, we laid the offender down and slid him out into the breezeway of Five Building. At this time Lieutenant Michael Proctor and CO 3 Anne Quick arrived on the scene and Lt. Proctor asked me if the offender was breathing, and he checked offender Martone's vitals. I explained to Lt. Proctor my knowledge of the situation of how the offender was awake when I first arrived, and how in about 7 to 8 minutes he became unconscious. Lt. Proctor, Officer Quick, and myself, with some help from 3 other offenders, lifted the offender up and carried him out to the front entrance of Five Building, where we lifted the offender onto the gurney. The offender was wheeled to the infirmary where Officer Joseph Boudreaux, Officer Quick, myself, and Officer Patricia Ellis placed bags of ice on the offender to cool him off while we waited on the paramedics to arrive. The ambulance arrived and they took over the situation.

Clifton Roundtree
8/8/2011
 7

Texas Department of Criminal Justice
INSTITUTIONAL DIVISION

Inter-Office Communications

To Lieutenant S. Lemler **Date** 08/09/11

From Lieutenant M. Proctor *MP* **Subject** Offender Martone, Michael #1395315

On August 8, 2011, at approximately 1935, I, Lieutenant Michael Proctor, responded to a call for a supervisor from Sergeant Clifton Roundtree to the Bottom of Five Building and at G-Line. Upon my arrival, offender Martone, Michael #1395315 was lying on a medical backboard in the entrance to G-Line unconscious but breathing and having a steady pulse. Sergeant Roundtree advised me that he had come to G-Line due to offender Martone possibly having a seizure, and that he had called for a wheelchair to get offender Martone to the Huntsville Unit Infirmary. Sergeant Roundtree further advised me that offender Martone was conscious and somewhat alert when he called for a wheelchair, but that by the time the wheelchair arrived, offender Martone's condition had deteriorated to the point that the offender became unconscious and the incident command system had to be initiated, and Sergeant Thomas Ford called 9-1-1. By this time, Officer Patricia Ellis CO III and Officer Anne Quick CO III arrived with a gurney, which was left at the entrance to Five Building. I again confirmed that offender Martone was breathing and had a steady pulse. Sergeant Roundtree, Officers Ellis and Quick, and myself, along with several offenders, carried offender Martone on the backboard out of Five Building and placed him on the gurney, at which time offender Martone was taken to the infirmary. Once in the infirmary, I told Sgt. Roundtree, Officer Ellis, and Officer Joseph Boudreaux CO IV, who had arrived at the infirmary, to get ice packs, which were placed under offender Martone's arms, on his neck area, and on his groin area, in the event that this incident was heat related, and I again confirmed that offender Martone was breathing and had a steady pulse. At this time, I notified Warden James Jones and advised him of the incident. Paramedics arrived at approximately 2020 and, after their assessment, advised me that they did not believe that the incident was heat related. Offender Martone, who was still breathing, was then placed inside the ambulance and it departed the unit at 2045 en route to the Huntsville airport to be transferred to a Life Flight helicopter in order to be flown to Herman Memorial Hospital. It was at this time that I returned to my normal duties. The Life Flight departed the Huntsville airport at approximately 2115.

Texas Department of Criminal Justice

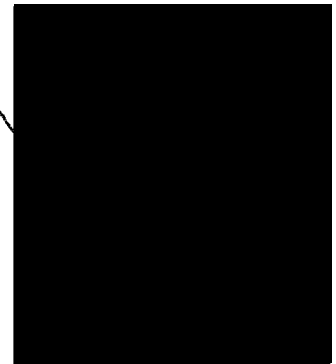
Inter-Office Communications

To Lt. K Simmons Date 8-9-11

From COIV G. Bake Subject Offender Death 8-8-11

On 8-8-11, I, COIV G. Bake was notified by Lt. K Simmons that I was needed to ride on life flight with an offender to be taken to the hospital. Myself and officer White received our OC cop from the radio picket and traveled to the Huntsville airport. There I received my pistol from the second shift officer and boarded the helicopter with offender Martone at 2115. We landed at Memorial Hermann in Houston at approx 2155. CPR was started on the offender at 2203 and at 2222 offender Martone was pronounced dead by Dr. Libby George. I notified Lt. Simmons at 2235. I was told by the life flight nurse that offender Martone's core temperature was 108 degrees F. when he was received at Hermann Memorial.

COIV G. Bake
 [Signature]



9

Texas Department of Criminal Justice

Inter-Office Communications

To Lieutenant ProctorDate 8.9.2011From PELLISSubject Offender Martone

August 8, 2011 at approximately 7:25 pm I officer Patricia Ellis COIV was asked by Sergeant Thomas Ford to take wheelchair to g-line bottom of five building. I was working the upper yard at this time. When I arrived to bottom of five building offender Martone, Michael Idcj # 35315 was slightly responsive sitting on a lockerbox in the offender dayroom. I was ordered by Sergeant Clifton Roundtree to go to the Huntsville Unit infirmary to get a backboard and a gurney because the offender would not assist with the wheelchair. I then went and got the backboard to the wheelchair. I placed the gurney outside and gurney from the HUI. I placed the backboard to g-line bottom of five building and took the offender. At this time the offender was unresponsive but still sitting. The offender was placed on the backboard from the infirmary. Sgt. Roundtree, and myself. At that time of several offenders, Sgt. Roundtree called for an ambulance and the offender moved outside of the cell block. Lieutenant Proctor and MS. Quick COIII arrived on the scene. The offender was then led out of five building by several offenders, Lieutenant Proctor, Sergeant Roundtree, MS. Quick, and myself. At this time the offender was placed on the gurney and strapped in. The offender was then wheeled to the HUI and at this time instructed officer Joseph Bondreaux COII, and myself. Lieutenant Proctor to get ice to place on offender Martone. After this I went to west yard to assist with getting ambulance inside the unit. I then resumed to my mail duties.

PELLIS
8.9.2011

10

11-03220
 Razim E
 KBS

A-11.1 Attachment C

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
 Health Services Division
 Custodial Death Report Information Worksheet

This form must be completed on all offenders who expire while in the custody of TDCJ

Offender Name: Martone, Michael		TDCJ #: 1395315		Facility: Huntsville	
Date of Death: 08/08/2011 @ 10:22PM		Was Autopsy Conducted?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Provisional Cause of Death					
01 <input type="checkbox"/> Illness/Natural (Exclude AIDS-related): _____					
02 <input type="checkbox"/> Acquired Immune Deficiency Syndrome (AIDS)					
03 <input type="checkbox"/> Alcohol/Drug Intoxication					
04 <input type="checkbox"/> Accidental Injury to Self – Describe: _____					
05 <input type="checkbox"/> Accidental Injury By Other (e.g. positional asphyxiation during cell extraction) Describe: _____					
06 <input type="checkbox"/> Suicide					
07 <input type="checkbox"/> Homicide committed by other offender(s)					
08 <input type="checkbox"/> Other Homicide – Specify: _____					
09 <input checked="" type="checkbox"/> Other Causes – Specify: <u>Heat Stroke on Morbid Obese patient with multiple medical problems</u>					
Circumstances Surrounding The Offender's Death					
Was the provisional cause of death the result of a pre-existing medical condition or did the offender develop the condition after admission into TDCJ?					
01 <input checked="" type="checkbox"/> Pre-existing medical condition					
02 <input type="checkbox"/> Developed condition after admission					
1. Intoxication at time of custody: <input type="checkbox"/> Not Intoxicated <input type="checkbox"/> Alcohol Only <input type="checkbox"/> Drugs Only					
<input type="checkbox"/> Drugs and Alcohol <input checked="" type="checkbox"/> Unknown					
2. Had the offender been receiving treatment by medical/mental health personnel for the medical/mental health condition after admission to your facility?					
<ul style="list-style-type: none"> • Include only medical/mental health treatment and medication related to the medical condition that caused the offender's death. • Exclude emergency care provided at the time of death. 					
<input checked="" type="checkbox"/> Yes – Describe: <u>Polypharmacy & HTN, HLD, CAD, ASTHMA, SZ & HCV, MORBID</u>					
<input type="checkbox"/> No					
a. Had deceased ever previously attempted suicide? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown					
b. Was deceased taking any prescription medication? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown					
c. Did deceased exhibit medical problems prior to death? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown					
d. Did deceased exhibit mental problems prior to death? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown					
e. Is suicide screening utilized at your facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
03 <input type="checkbox"/> Not applicable – cause of death was accidental injury, intoxication, suicide, or homicide.					
Complete the following for accidental injury, intoxication, suicide, and homicide deaths only					
1. When did this incident occur?					
<input type="checkbox"/> Morning (6 am to 11:59 am)					
<input type="checkbox"/> Afternoon (Noon to 5:59 pm)					
<input type="checkbox"/> Evening (6 pm to 11:59 pm)					
<input type="checkbox"/> Overnight (Midnight to 5:59 am)					
2. Where did the incident take place?					
<input type="checkbox"/> In the offender's cell <input type="checkbox"/> In a temporary holding area/lockup					
<input type="checkbox"/> In a common area within the facility (e.g. yard, library, cafeteria, day room, workshop)					
<input type="checkbox"/> Outside the prison <input type="checkbox"/> Elsewhere – Specify: _____					
Name of Facility Medical Representative (required):					
Abbas Khoshdel, MD 08/09/2011					

11/10/2011 9:44 Remote ID Imprint ID

2/12

Luis A. Sanchez, M.D.
Chief Medical Examiner



Main: (713) 796-9292
Fax: (713) 796-6844

Harris County Institute of Forensic Sciences

11-03220
Region 2
KBS

AUTOPSY REPORT

Case No. ML11-2363

August 10, 2011

ON THE BODY OF

1395315

Michael David Martone

Texas Department of Corrections
Huntsville, Texas

CAUSE OF DEATH: Hyperthermia

CONTRIBUTORY CONDITION: Hypertensive and atherosclerotic
cardiovascular disease

MANNER OF DEATH: Accident

DATE OF DEATH: August 8, 2011

Brandy Shattuck, M.D.
Forensic Pathology Fellow

11/7/11

MMDDYY

Reviewed by:

RECEIVED

NOV 10 2011

COPIED AND SENT

Merrill O. Hines III, M.D.
Assistant Medical Examiner

11/8/11

MMDDYY

1885 Old Spanish Trail, Houston, Texas 77054-2001

www.hcix.net/ifs

Member Institution of the Texas Medical Center

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Plaintiffs MSJ Appx. 5387

OIG- Martone 1592

ML11-2363

-2-

POSTMORTEM EXAMINATION ON THE BODY OF

Michael David Martone
Texas Department of Corrections
Huntsville, Texas

HISTORY: This 57 year old white man was transported to Memorial Hermann Texas Medical Center Hospital, via Life Flight, arriving at 9:31 p.m. on August 8, 2011, and was pronounced dead at 10:22 p.m. the same day.

AUTOPSY: The autopsy is performed at the Harris County Institute of Forensic Sciences by Forensic Pathology Fellow Brandy Shattuck, M.D., under the supervision of Assistant Medical Examiner Merrill O. Hines III, M.D., pursuant to Article 49.25, Texas Code of Criminal Procedure, beginning at 9:45 a.m. on August 10, 2011.

EXTERNAL APPEARANCE: The body is that of a normally developed, obese man clad in white shorts and white underwear. Within the white body bag are a green blanket and a white blanket.

The body weighs 300 pounds, is 75 inches in length, and appears compatible with the reported age of 57 years. Rigor mortis is not developed in the upper and lower extremities, neck, or jaw. Fixed red-purple lividity is posterior. The body is cool secondary to refrigeration.

The scalp hair is brown intermixed with gray and approximately 1/2 inch in length. There is no facial hair. The irides are brown. The corneae are clear, the conjunctivae are congested, and the sclerae are congested. There are no petechiae. The external auditory canals, nares, and oral cavity are free of foreign material. Purge fluid is in the oral cavity. The nasal septum is palpably intact. The lips are without injury. The lower teeth are natural. The upper teeth are absent.

Examination of the neck reveals no evidence of injury. The abdomen is protuberant.

The extremities have symmetric musculature with no hesitation scars or needle tracks.

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Michael David Martone
ML11-2363

-3-

The external genitalia are those of an adult male with descended testicles. The posterior torso is symmetric.

IDENTIFYING MARKS AND SCARS: There are no scars. Multiple tattoos are present: on the right forearm, a Harley-Davidson logo and dragon; on the right upper arm, a dragon; on the left chest, the phrase "BROWN EYED LADY"; on the left arm, a skull with the name "ROXANNE" underneath; on the left forearm, the word "OUTLAW"; on the left wrist, a flower; on the right leg, a cat; on the right chest, an unidentified symbol; and on the left chest, a flower.

EVIDENCE OF THERAPEUTIC INTERVENTION: An endotracheal tube is positioned appropriately in the mouth. An intravenous catheter is on the posterior aspect of the right hand. Multiple electrocardiogram adhesive electrode pads are on the anterior chest and torso. Defibrillator pads are on the anterior right chest and lateral left chest. A bandage is in the right antecubital fossa overlying a needle puncture mark with associated ecchymosis.

EVIDENCE OF INJURY: A punctate wound is on the right anterior ankle.

INTERNAL EXAMINATION:

BODY CAVITIES: No adhesions are in any of the body cavities. No abnormal collections of fluids are within the body cavities. All internal organs are in the normal anatomic position. The subcutaneous fat layer of the abdominal wall is 3 inches thick.

HEAD (CENTRAL NERVOUS SYSTEM): The subscalp tissues are free of contusions. The calvaria are unremarkable. The dura mater and falx cerebri are intact. There is no epidural, subdural, or subarachnoid hemorrhage. The 1575 gram brain is normal in shape. The leptomeninges are thin and delicate. The cerebral hemispheres are symmetrical. The structures at the base of the brain, including cranial nerves and blood vessels, are intact. The cerebral cortical ribbon is well-demarcated from the white matter. The deep nuclei and ventricles have the standard configuration with no lesions. Parasagittal views of the cerebellum and transverse views of the brainstem are unremarkable.

NECK: The strap muscles of the neck are without hemorrhage. The tongue has a single 4 millimeter focus of hemorrhage in the deep musculature, without overlying

Michael David Martone

ML11-2363

-4-

mucosal injury. The hyoid bone and thyroid and cricoid cartilages are intact. The laryngeal mucosa is tan and glistening with no edema. The epiglottis is thin without edema. The atlanto-occipital articulation is stable. No cervical fractures are palpated.

CARDIOVASCULAR SYSTEM: The 550 gram heart has a smooth, glistening epicardial surface with a moderate amount of epicardial fat. The coronary artery system is normally distributed, has patent ostia and a right-dominant distribution. A yellow eccentric atherosclerotic plaque produces approximately 80-90 percent stenosis of the distal left anterior descending coronary artery. The circumflex and right coronary arteries are patent. The myocardium is red-brown, without pallor or fibrosis. The muscle is diffusely soft. The atrial and ventricular septa are intact. The wall thickness of the left ventricle is 1.7 centimeters, the right ventricle 0.3 centimeter, and the septum 1.7 centimeters. The chambers of the heart are not dilated. The endocardial surfaces are smooth and without hemorrhage. The four cardiac valves are thin, freely mobile, and measure as follows: tricuspid valve 13.5 centimeters, pulmonic valve 8.2 centimeters, mitral valve 11.0 centimeters, and aortic valve 7.5 centimeters.

The aorta and its major branches arise normally and follow their usual distribution, with scattered calcific atherosclerosis throughout. The venae cavae and their major tributaries return to the heart in their usual distribution and are free of thrombi.

RESPIRATORY SYSTEM: The 1200 gram right lung and the 1125 gram left lung have normal lobation. The pleural surfaces are smooth and shiny, with abundant anthracotic pigment deposition. The parenchyma is edematous and congested, without masses or hemorrhage. Cut surfaces exude copious amounts of serosanguineous fluid. The bronchi are unremarkable. The vasculature is without thromboemboli.

HEPATOBIILIARY SYSTEM: The 1475 gram liver has a smooth, glistening intact capsule covering a dark red-brown, spongy parenchyma, without focal lesions or visible or palpable fibrosis.

The gallbladder contains greater than 30 milliliters of green-brown, viscous bile; the mucosa is velvety with yellow flecks. The extrahepatic biliary tree is patent, without evidence of calculi.

Michael David Martone

ML11-2363

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ALIMENTARY SYSTEM: The esophagus is lined by gray-white, smooth mucosa. The gastric mucosa exhibits the usual rugal folds and the lumen contains approximately 100 milliliters of red, thin fluid with no alcoholic aromatic odor, granular material or intact pills. The small intestines, colon, and appendix are unremarkable. The pancreas has a pink-tan lobulated appearance and the ducts are clear.

GENITOURINARY SYSTEM: The renal capsules are smooth, thin, and semi-transparent. The underlying cortical surfaces are smooth and pale tan. The cortices are sharply delineated from the medullary pyramids, which are red-purple to tan and unremarkable. The calyces, pelves, and ureters are unremarkable. The right kidney weighs 225 grams and the left kidney weighs 250 grams.

The urinary bladder has no urine; the mucosa is pink-white and congested. The testes, prostate gland, and seminal vesicles are unremarkable.

RETICULOENDOTHELIAL SYSTEM: The 275 gram spleen has a smooth, intact capsule covering dark red-purple, soft parenchyma; the white pulp is grossly unremarkable. The regional lymph nodes are not enlarged.

ENDOCRINE SYSTEM: The thyroid gland has a normal shape and size with a uniform red-brown parenchyma. The parathyroid glands are inconspicuous. The adrenal cortices are golden yellow and uniformly thin while the medullae are thin and gray. The pituitary gland is unremarkable.

MUSCULOSKELETAL SYSTEM: The vertebrae, clavicles, sternum, ribs, and pelvis are without fracture or developmental abnormality. The musculature is normally distributed; a single 1.6 centimeter focus of intramuscular hemorrhage is in the right forearm near the wrist. The diaphragm is intact.

TOXICOLOGY: Blood, vitreous fluid, urine, bile, stomach contents, liver and brain are submitted.

HISTOLOGY: Representative sections of the heart, lungs, liver, kidney, pancreas, spleen, thyroid, adrenal, subcutaneous right arm hemorrhage, and brain are submitted.

MICROBIOLOGY: Heart blood is submitted for aerobic and anaerobic cultures.

Michael David Martone
ML11-2363
-6-

PATHOLOGIC DIAGNOSES

- I. Hyperthermia
 - A. History of weakness and light-headedness per nursing visit on August 8, 2011
 - B. Witnessed collapse in unit, per report
 - C. Wide complex tachycardia and hypotensive with Progression to PEA, per EMS run sheet
 - D. Bladder temperature of 106.5, per medical records
 - E. Unit maximum temperature of 105.3 per Huntsville unit temperature log
- II. Hypertensive and atherosclerotic cardiovascular disease
 - A. Cardiomegaly with concentric left ventricular hypertrophy
 - B. Myocyte hypertrophy with associated myocardial fibrosis
 - C. 80 percent stenosis, left anterior descending coronary artery
 - D. Nephro- and arteriolosclerosis
- III. Pulmonary anthracosis with emphysema
- IV. Clinical history of seizure disorder treated with Dilantin
- V. Clinical history of depression treated with nortriptyline
- VI. Early decomposition
- VII. Ancillary Studies
 - A. Microbiology, non-contributory
 1. Blood cultures: *Clostridium sordellii* consistent with putrefaction
 - B. Toxicology, non-contributory
 1. Postmortem toxicology
 - a. Ethanol of 0.03 g/dL in heart blood consistent with early decomposition; refer to attached toxicology report
 - b. Prescribed medications in postmortem blood sample; refer to attached toxicology report
 2. Vitreous electrolytes
 - a. Non-contributory; elevated potassium consistent with early decomposition; no evidence of dehydration in postmortem sample

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HARRIS COUNTY INSTITUTE OF FORENSIC SCIENCES
1885 OLD SPANISH TRAIL
HOUSTON, TEXAS 77054-2001

Brandy Shattuck, M.D.
Forensic Pathology Fellow

ML11-2363

MICROSCOPIC EXAMINATION

LIVER - Autolysis with background fibrosis.

KIDNEY - Sclerotic glomeruli, arteriolosclerosis, nephrosclerosis.

BRAIN - Perivascular clearing with associated pigment.

LUNGS - Atelectasis, congestion, anthracosis, airspace enlargement with alveolar septal destruction.

HEART - Myocyte hypertrophy with associated interstitial and perivascular fibrosis, bacteria without associated inflammation.

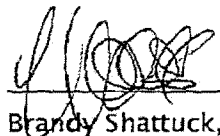
PANCREAS - Autolysis with associated fat necrosis.

THYROID - No histopathologic abnormality.

ADRENAL - No histopathologic abnormality.

SPLEEN - No histopathologic abnormality.

SKIN AND SUBCUTANEOUS HEMORRHAGE - Hyperkeratotic epidermis with underlying intramuscular hemorrhage without associated inflammation.



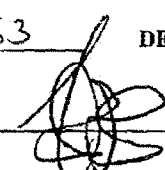
Brandy Shattuck, M.D.
Forensic Pathology Fellow

11/5/11
MMDDYY

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OFFICE OF THE MEDICAL EXAMINER OF HARRIS COUNTY

JOSEPH A. JACHIMCZYK FORENSIC CENTER


1885 OLD SPANISH TRAIL
HOUSTON, TEXAS 77054-2098CASE NO: ML11-2363DECEDENT'S NAME: Martone, MichaelDOCTOR'S SIGNATURE: Hoop

ET

Foley

Cold pack
in pantsR hand
IVR antecub
brachial

Liver - post/fixed

Rigor Eyes Brown
Cyanotic
petechiaeHair
brown/brn
Y/ashNails
intact

Hoop ID

L wrist

ML ID L
wristWhite pants
White unders
Green & white
blanket

Pants wet

TattoosR forearm
Darkly
DiagonalR arm
DiagonalL chest
Brown Eye bagL arm Skull
RearL Forearm
Outlaw

L wrist Skull

Page 1 of 1

Not to scale

Copy of OIG case to Litigation Support on 09.19.2014 by ce.
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Plaintiffs' MSJ Appx. 5394

OIG- Martone 1599

HARRIS COUNTY INSTITUTE OF FORENSIC SCIENCES

1885 Old Spanish Trail

Houston, Texas 77054-2001

Phone: 713-796-6830 Fax: 713-796-6838

LABORATORY REPORT

September 22, 2011

LABORATORY NUMBER: ML11-2363



Deceased: MICHAEL DAVID MARTONE

Submitted By:

Brandy Shattuck, M.D.

Forensic Pathology Fellow

Harris County Institute of Forensic Sciences

1885 Old Spanish Trail

Houston, TX 77054

Agency Number: ML11-2363

Submission Date: August 10, 2011

Specimen: Blood (heart)

Analyte

Ethanol

Nortriptyline

Result

0.03 g/dL

Presumptive positive

Analytical Method

Headspace GC

GC/MS

Specimen: Vitreous Humor

Analyte

Chloride

Creatinine

Glucose

Potassium

Sodium

Urea Nitrogen

Result

104 mEq/L

0.9 mg/dL

21 mg/dL

12.0 mEq/L

139 mEq/L

11 mg/dL

Analytical Method

Ion Selective Electrode

Spectrophotometric

Spectrophotometric

Ion Selective Electrode

Ion Selective Electrode

Spectrophotometric

Specimen: Bile

Analyte

Ethanol, Methanol, Isopropanol, Acetone

Result

None Detected

Analytical Method

Headspace GC

Specimen: Blood (heart)

Analyte

7-aminoclonazepam

Acetone, Methanol, Isopropanol

Alprazolam

Amphetamine

Barbiturates

Clonazepam

Cocaine Metabolite

Desalkylflurazepam

Diazepam

Lorazepam

Marijuana Metabolite

Methadone

Methamphetamine

Nordiazepam

Result

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

None Detected

Analytical Method

LC/MS/MS

Headspace GC

LC/MS/MS

Immunoassay

Immunoassay

LC/MS/MS

Immunoassay

LC/MS/MS

LC/MS/MS

LC/MS/MS

Immunoassay

Immunoassay

Immunoassay

LC/MS/MS

Medical Examiner's Initial

Unless otherwise requested, toxicology specimens will be discarded one year after date of receipt.

This Laboratory is Accredited by ASCLD/LAB-International and ABFT.

Page 1 of 2

NOT FOR RELEASE

621

LABORATORY NUMBER: ML11-2363

DATE: September 22, 2011

Specimen: Blood (heart)Analyte

Opiates
Other Standard Basic Drugs
Oxazepam
Phencyclidine
Temazepam
Triazolam

Result

None Detected
None Detected
None Detected
None Detected
None Detected
None Detected

Analytical Method

Immunoassay
GC/MS
LC/MS/MS
Immunoassay
LC/MS/MS
LC/MS/MS

Specimen: Vitreous HumorAnalyte

Ethanol, Methanol, Isopropanol, Acetone
Ketones

Result

None Detected
None Detected

Analytical Method

Headspace GC
Color Test

INSTITUTE OF FORENSIC SCIENCES

SEP. 22 2011

RECEIVED
RECORDS CUSTODIAN*F. Gualle*

Fessessework Gualle, DVM, D-ABVT, FTS-ABFT
Assistant Chief Toxicologist
September 20, 2011

Ashraf Mozayani

Ashraf Mozayani, Ph.D., D-ABFT,
Chief Toxicologist
September 22, 2011

Medical Examiner's Initial *AS*

Unless otherwise requested, toxicology specimens will be discarded one year after date of receipt.

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HARRIS COUNTY INSTITUTE OF FORENSIC SCIENCES

1885 Old Spanish Trail
Houston, Texas 77054-2001
Phone: 713-796-6830 Fax: 713-796-6838

LABORATORY SUPPLEMENTAL REPORT

October 24, 2011

LABORATORY NUMBER: ML11-2363



Deceased: MICHAEL DAVID MARTONE

Submitted By:

Brandy Shattuck, M.D.
Forensic Pathology Fellow

Harris County Institute of Forensic Sciences
1885 Old Spanish Trail
Houston, TX 77054

Agency Number: ML11-2363

Submission Date: August 10, 2011

Specimen: Blood (heart)

Analyte	Result	Analytical Method
Nortriptyline	1.1 mg/L	GC/MS
Phenytoin	6.2 mg/L	GC/MS

Specimen: Stomach Contents

Analyte	Result	Analytical Method
Nortriptyline	3.0 mg/L	GC/MS

Specimen: Blood (heart)

Analyte	Result	Analytical Method
Amitriptyline	None Detected	GC/MS

Specimen: Stomach Contents

Analyte	Result	Analytical Method
Amitriptyline	None Detected	GC/MS

HARRIS COUNTY INSTITUTE OF FORENSIC SCIENCES

OCT 25 2011

RECEIVED
RECORDS CUSTODIAN

MB

Lynn DeCuir, B.S., T.C. (N.R.C.C.), FTS-ABFT
Toxicologist
October 22, 2011

Jeff Walterscheid, Ph.D., D-ABFT
Assistant Chief Toxicologist
October 24, 2011

Medical Examiner's Initial

Unless otherwise requested, toxicology specimens will be discarded one year after date of receipt.
This Laboratory is Accredited by ASCLD/LAB-International and ABFT.

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11:55:34 a.m. 04-11-2013

9/3

AMENDMENT TO MEDICAL CERTIFICATION OF CERTIFICATE OF DEATH

STATE OF TEXAS

STATE FILE NUMBER 142-11-103310

ENTER NAME OF DECEASED AND PLACE OF DEATH EXACTLY AS SHOWN ON THE ORIGINAL DEATH CERTIFICATE

1. LEGAL NAME OF DECEASED (includes AKA's, if any) (First, Middle, Last)		DATE OF DEATH	
MICHAEL DAVID MARTONE		08/08/2011	
PLACE OF DEATH (CITY OR TOWN AND COUNTY)		IS THE DATE OF DEATH BEING CORRECTED?	
HERMANN MEMORIAL HOSPITAL, HOUSTON, HARRIS		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
25. CERTIFIER (Check only one)			
<input type="checkbox"/> Certifying physician. To the best of my knowledge, death occurred due to the cause(s) and manner stated. <input checked="" type="checkbox"/> Medical Examiner/Judge of the Peace. On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date and place, and due to the cause(s) and manner stated.			
27. SIGNATURE OF CERTIFIER		28. DATE CERTIFIED (Mo/Yr)	29. LICENSE NUMBER
MERRILL O. HINES III, M.D., BY ELECTRONIC SIGNATURE		11/10/2011	M4159
31. PRINTED NAME, ADDRESS OF CERTIFIER (Street and Number, City, State, Zip Code)		32. TIME OF DEATH (Actual or presumed)	
MERRILL O. HINES III, M.D. 1885 OLD SPANISH TRAIL, HOUSTON, TX 77054-2098		10:22 PM	
33. PART 1. ENTER THE CHAIN OF EVENTS - DISEASES, INJURIES, OR COMPLICATIONS - THAT DIRECTLY CAUSED THE DEATH. DO NOT ENTER TERMINAL EVENTS SUCH AS CARDIAC ARREST, RESPIRATORY ARREST, OR VENTRICULAR FIBRILLATION WITHOUT SHOWING THE ETIOLOGY. DO NOT ABBREVIATE. ENTER ONLY ONE CAUSE ON EACH		34. WAS AN AUTOPSY PERFORMED?	
IMMEDIATE CAUSE (Final disease or condition resulting in death)		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
a. HYPERTHERMIA Due to (or as a consequence of)		Approximate interval Onset to death	
b. Due to (or as a consequence of)			
c. Due to (or as a consequence of)			
d. Due to (or as a consequence of)			
PART 2. ENTER OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART 1.		35. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?	
HYPERTENSIVE AND ATHEROSCLEROTIC CARDIOVASCULAR DISEASE		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
36. MANNER OF DEATH	37. DID TOBACCO USE CONTRIBUTE TO DEATH?	38. IF FEMALE	39. IF TRANSPORTATION INJURY, SPECIFY.
<input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Probably <input type="checkbox"/> Unknown	<input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to one year before death <input type="checkbox"/> Unknown if pregnant within this past year	<input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify)
40a. DATE OF INJURY (Mo/Day/Yr)	40b. TIME OF INJURY	40c. INJURY AT WORK?	40d. PLACE OF INJURY (e.g., Decedent's home, construction site, restaurant, wooded area)
08/08/2011	08:00 PM	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	UNIT JAIL
40e. LOCATION (Street and Number, City, State, Zip Code)		40f. COUNTY OF INJURY	
815 12TH STREET, HUNTSVILLE, TX 77348		WALKER	
41. DESCRIBE HOW INJURY OCCURRED			
ENVIRONMENTAL HEAT EXPOSURE			
42a. REGISTRAR FILE NO.	42b. DATE FILED	42c. STATE REGISTRAR	
0212666	11/10/2011	<i>Pauline L. Harris</i>	

EDR 000001002358

VS-174 REV 1/2006

131

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11:54:57 a.m. 04-11-2013

2/3

TEXAS DEPARTMENT OF STATE HEALTH SERVICES - VITAL STATISTICS

AUG 24 2011

STATE OF TEXAS

CERTIFICATE OF DEATH

STATE FILE NUMBER 142-11-103310

1. LEGAL NAME OF DECEASED (Include AKA's, if any) (First, Middle, Last) (Maiden)

MICHAEL DAVID MARTONE

08/08/2011

3 SEX

MALE

4 DATE OF BIRTH

07/07/1954

5 AGE-Last Birthday

57

6 IF UNDER 1 YR

Mo

Days

7 IF UNDER 1 DAY

Hours

Mn

8 BIRTHPLACE (City & State or Foreign Country)

MIAMI, FL

9 SOCIAL SECURITY NUMBER

10 MARITAL STATUS AT TIME OF DEATH

☒ Married☐ Widowed☐ Divorced☐ Never Married☐ Unknown

11 SURVIVING SPOUSE'S NAME (If wife, give name prior to first marriage)

DEBRA MACKIN

10a RESIDENCE STREET ADDRESS

815 12TH STREET

10b APT. NO.

10c CITY OR TOWN

HUNTSVILLE

10d COUNTY

WALKER

10e STATE

TEXAS

10f ZIP CODE

77348

10g INSIDE CITY LIMITS?

☒ Yes☐ No

11 FATHER'S NAME

RALPH MARTONE

12 MOTHER'S NAME PRIOR TO FIRST MARRIAGE

JOAN GASCOINGE

13 PLACE OF DEATH (CHECK ONLY ONE)

14 IF DEATH OCCURRED IN A HOSPITAL

☐ Inpatient☒ ER/Outpatient☐ OOA☐ Hospice Facility☐ Nursing Home☐ Decedent's Home☐ Other (Specify)

15 COUNTY OF DEATH

HARRIS

16 CITY/TOWN, ZIP (If OUTSIDE CITY LIMITS, GIVE PRECINCT NO.)

HOUSTON, 77024

17 FACILITY NAME (If not institution, give street address)

HERMANN MEMORIAL HOSPITAL

18 INFORMANT'S NAME & RELATIONSHIP TO DECEASED

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

PRISON - LISA A. D'CUNHA

19 MAILING ADDRESS OF INFORMANT (Street and Number, City, State, Zip Code)

262 FM 3478 SUITE B, HUNTSVILLE, TX 77320

19 METHOD OF DISPOSITION

☐ Burial☒ Cremation☐ Donation☐ Entombment☐ Removal from state☐ Other (Specify)

20 SIGNATURE AND LICENSE NUMBER OF FUNERAL DIRECTOR OR PERSON ACTING AS SUCH

PHILLIP E BUSH, BY ELECTRONIC SIGNATURE - 113653

21

☒ Unknown

Section

Block

Lot

Space

22 PLACE OF DISPOSITION (Name of cemetery, crematory, other place)

CREMATE TEXAS CREMATORY

23 LOCATION (City, town, and State)

SOUTH HOUSTON, TX

24 NAME OF FUNERAL FACILITY

CARNES - TDCJ

25 COMPLETE ADDRESS OF FUNERAL FACILITY (Street and Number, City, State, Zip Code)

3100 GULF FREEWAY, TEXAS CITY, TX 77591

26 CERTIFIER (Check only one)

☐ Certifying physician to the best of my knowledge, death occurred due to the cause(s) and manner stated.☒ Medical Exam. for Justice of the Peace - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date and place, and due to the cause(s) and manner stated.

27 SIGNATURE OF CERTIFIER

MERRILL O. HINES III, M.D., BY ELECTRONIC

SIGNATURE

28 DATE CERTIFIED (Mo/Day/Yr)

08/15/2011

29 LICENSE NUMBER

M4159

30 TIME OF DEATH (Actual or presumed)

10:22 PM

31 PRINTED NAME, ADDRESS OF CERTIFIER (Street and Number, City, State, Zip Code)

MERRILL O. HINES III, M.D. 1885 OLD SPANISH TRAIL, HOUSTON, TX 77054-2098

32 TITLE OF CERTIFIER

ASST. MED. EXAM

33 PART 1: ENTER THE CHAIN OF EVENTS - DISEASES, INJURIES, OR COMPLICATIONS THAT DIRECTLY CAUSED THE DEATH. DO NOT ENTER

TERMINAL EVENTS SUCH AS CARDIAC ARREST, RESPIRATORY ARREST, OR VENTRICULAR FIBRELLATION WITHOUT SHOWING THE

ETIOLOGY. DO NOT ABBREVIATE. ENTER ONLY ONE CAUSE ON EACH

IMMEDIATE CAUSE (Final

disease or condition

resulting in death)

a. PENDING

Due to (or as a consequence of)

Sequentially list conditions

if any, leading to the cause

listed on line a. Enter the

UNDERLYING CAUSE

(disease or injury that

initiated the events resulting

in death) LAST

b.

Due to (or as a consequence of)

c.

Due to (or as a consequence of)

d.

Due to (or as a consequence of)

34 PART 2: ENTER OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH, BUT NOT RESULTING IN THE UNDERLYING

CAUSE GIVEN IN PART 1.

34 WAS AN AUTOPSY PERFORMED?

☒ Yes ☐ No

35 WERE AUTOPSY FINDINGS AVAILABLE TO

COMPLETE THE CAUSE OF DEATH?

☒ Yes ☐ No

36 MANNER OF DEATH

☐ Natural☐ Accident☐ Suicide☐ Homicide☒ Pending investigation☐ Could not be determined

37 DID TOBACCO USE CONTRIBUTE

TO DEATH?

☐ Yes☐ No☒ Unknown

38 IF FEMALE:

☐ Not pregnant within past year☐ Pregnant at time of death☐ Not pregnant, but pregnant within 42 days of death☐ Not pregnant, but pregnant 42 days to one year prior to death☐ Unknown if pregnant within the past year

39 IF TRANSPORTATION INJURY

SPECIFY:

☐ Driver/Operator☐ Passenger☐ Pedestrian☐ Other (Specify)

40a DATE OF INJURY (Mo/Day/Yr)

40b TIME OF INJURY

40c INJURY AT WORK?

☐ Yes ☐ No

40d PLACE OF INJURY (e.g. Decedent's home, construction site, restaurant, wooded area)

40e LOCATION (Street and Number, City, State, Zip Code)

40f COUNTY OF INJURY

41 DESCRIBE HOW INJURY OCCURRED

42a REGISTRAR FILE NO

0212666

42b DATE RECEIVED BY LOCAL REGISTRAR

08/24/2011

42c REGISTRAR

REGISTRAR - CITY OF HOUSTON, ELECTRONICALLY FILED

EDR NUMBER 000051002358

TEXAS DEPARTMENT OF STATE HEALTH SERVICES - VITAL STATISTICS UNIT

Warning: The penalty for knowingly making a false statement in this form can be 2-10 years in prison and a fine up to \$10,000. Health and Safety Code, Sec. 195.103

VS-112 REV 1/2006

13.2

Admission Summary

Admission Summary										NV	
Name		Number		Offense				Sent.		Class Ed. Plea	
MARTONE, Michael David (W)		1395315		INTOX MANSLAUGHTER DDLY WPN				25Y		HC 12 Yes	
12/30/2028	12/30/2028						Not Tested 87	52		11/10/2006 RJ / tjs	Methodist
Max Expir	Minimum Expiration					E.A./I.Q.	Age	DOB	Int./By	Religion	
Harris								03/14/2003		10/26/2006	
COUNTY								Sent. Beg.		Date Received	

Charter Boat Captain

EMPLOYMENT

Inst.	Commitments	Escapes	ALL POSTINGS
Juv Prob			Jail Good Time Credited From Sentence Begin Date
Prob Snt	2-1REV		70th/72nd/73rd LEGISLATURE - NON-MANDATORY SUPERVISION PROSPECT
Jails	18		DISCRETIONARY MANDATORY SUPERVISION RELEASE CANDIDATE HB-1433
Reft'y			NOT ELIGIBLE FOR SB 1167 PER TDCI-ID BOARD POLICY
Det Hosp			CALC. PAROLE ELIG. ON CALENDAR TIME
Det Home			L1 EFF: 03/14/2003 W EFF: 03/14/2003
St Trans			12-04-06 HV UCC (01) L1/G2 LAUNDRY
St Jail			6-1-07 HV UCC (11) REMAIN G2
SubA TF			3-21-08 HV UCC (05) APPROVE ONE TIME CONTACT W/ # DISAPPROVE CONTACT VISIT
TDCI-ID	1		5-28-08 HV UCC (06) PROMOTE S3
O/Pris	2		

MARTONE,
Michael David
1395315

Transfers and Assignments

Date	Place	Work

ALL POSTINGS (Cont'd.)

INTOX MANSLAUGHTER DDLY WPN (1) (25Y)

ILLNESS, INJURY OR DEATH - NOTIFY

Roxanne Martone (DAU)

2409 Willow Trail, Deer Park, TX (713-231-4343)

RACE: WHITE

SEX: MALE

HEIGHT: 06' 01"

WEIGHT: 270

COMPLEXION: RUDDY

EYES: BRO

HAIR: BRO

NATIVITY: Miami, Dade Co., FL

MARKS and SCARS:

CUT SCAR UNDER CHIN, OPER SCAR FRNT LFT LEG, TAT DEBRA/1029-86/KATY MY BROWN EYED LADY UPR LFT/RT CHEST. OTHER TATS AND SCARS

DETAINEES:

[illegible]

Reports indicate 24 arrests involving 1 violent offense--24M adult prob Brazoria Co. 1994 for DWI (revoked to Co. Jail, time served, NOT VERIFIED)--3Y adult prob Columbus, GA 1994 for Forg and Utter US Treasury Check (claims completed, NOT VERIFIED)--XX/ FL State Penitentiary #066525, 15Y sentence for 2 counts of BURG, GRAND THEFT, and 2 counts of GRAND LARCENY, confined to FL State Penitentiary, Lantana, FL, began sentence 1978, maintained clear record, claims rel'd and disch during 1984 (NOT VERIFIED)--X/ FL State Penitentiary # unk, Reception Center, Lake Butler, FL, 2Y sentence for BURG HABIT, confined 1M, maintained clear record, transferred Lantana Corr Facility, Lantana, FL, confined 1 1/2Y, parole 10/1986 and claims disch sentence 07/1987 (NOT VERIFIED)--X/ TDCJ-CID #895608, 6Y sentence from Brazoria Co. for 2 counts of FRAUD, 11/29/1999 rec'd NF, 12/06/1999 transferred DU as ID transient, 01/19/2000 transferred HV L1 (min-in), 01/20/2000 asgn CV, 04/04/2000 transferred WR (IPTC) (min-in), 05/07/2000 transferred and asgn JM, 05/11/2000 asgn WR medical release, 01/09/2001 rel'd parole Harris Co., 09/11/2004 disch sentence--as present TDCJ-CID #1395315, rec'd NF 10/26/2006, maintained clear record--claims contact w/ wife, 3 children and 1 half sibling--claims parents deceased--claims 2 marital failures w/ 2 children involved--claims married--refer to D&E Classification Summary--AKA: Capparelli, Larry; Mantone, Michael David--

The current offense of INTOXICATED MANSLAUGHTER WITH DEADLY WEAPON involves the subject on 12/20/2002, in Webster, Texas, during the daytime, observed by a witness driving his vehicle from lane to lane nearly side swiping several vehicles on the roadway. The subject lost control of his vehicle and struck a grassy medium, hitting a 41 year old Hispanic female victim (Marlene Gandres) with his vehicle, throwing the victim in the air and the victim struck the subject's windshield killing her instantly. The victim was picking up trash when the subject committed the offense. The subject had a blood test which revealed 0.39 milligrams of methadone, 0.10 grams of cocaine and 0.99 milligrams of benzoylecgonine in his blood system and in his body. The subject was arrested on the scene by police and placed in the Harris County Jail, where he was unable to post a \$20,000 bond (VERIFIED).

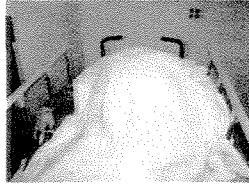
SID #: 05278182
FBI #: 236015M11
SSN #: [REDACTED]
DL #: [REDACTED]



11-03220 Martone
#1395315 HV 001



11-03220 Martone
#1395315 HV 002



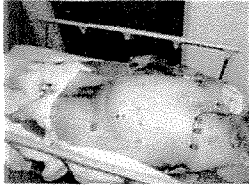
11-03220 Martone
#1395315 HV 003



11-03220 Martone
#1395315 HV 004



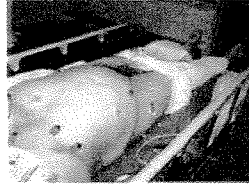
11-03220 Martone
#1395315 HV 005



11-03220 Martone
#1395315 HV 006



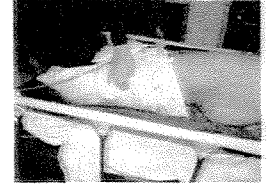
11-03220 Martone
#1395315 HV 007



11-03220 Martone
#1395315 HV 008



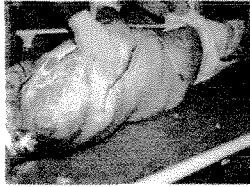
11-03220 Martone
#1395315 HV 009



11-03220 Martone
#1395315 HV 010



11-03220 Martone
#1395315 HV 011



11-03220 Martone
#1395315 HV 012

15

* Not a seg area - used for security checks only

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

Daily Activity Log

I. HOUSING AREA

Instructions: A separate form is to be completed for each status. On the left, enter the date and location information. Place a ✓ in the blank beside the appropriate status and complete additional information for Management Status and Lockdowns. (NOTE: Refer to appropriate Directive or Plan [noted in brackets] for required activities.)

Date: 8-8-11

Unit: HV

Cellblock/Pod: G

Row/Section: 1-2

☐ Administrative Segregation [Ad Seg Plan]☐ Solitary [Ad-03.53]☐ Management Status (Ad Seg: Solitary) [Ad-03.80]☐ Lockdown (Incident #: Week #: # of Offenders) [AD-03.31]

II. ROUTINE ACTIVITIES

	Time		IF OFFENDER(S) DID NOT RECEIVE, NOTE EXCEPTIONS (Instructions: For Ad Seg, Solitary, or Management Status - use cell number; for Lockdown Status - use offender number.)	Officer (Print last name; Sign initials)
	Start	Finish		
Breakfast (B)				
Lunch (L)				
Supper (S)				
Showers				
Recreation				
Necessities				

III. CELL CLEANLINESS INSPECTIONS

Time of Inspection:	NOTE VIOLATIONS (Instructions: For Ad Seg, Solitary, or Management Status - note by cell number; for Lockdown Status - note using offender number.)	
	Inspected by:	
	B = Bunk (used for intended purpose, no clutter, etc.)	
	C = Cell front (uncovered, unobstructed, etc.)	
	F = Floor (clean, uncluttered, etc.)	
	N = Necessities (unaltered, clean, etc.)	
	P = Property (not altered; properly stored; no excess)	
	T = Toilet (clean, not plugged, etc.)	
	W = Walls/Windows (uncovered, clean, nothing posted, etc.)	

IV. SECURITY CHECKS (If additional space is needed, record in Section V.)

12:01 A to 8:00 A	Time	0005	0035	0101	0134	0206	0231	0303	0333	0403	0432	0504	0534	0602	0631	0702	0729
	Initial	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	ART	ART	ART	ART
8:01 A to 4:00 P	Time	0801	0832	0900	0931	1001	1027	1105	1130	1202	1228	1302	1327	1400	1430	1500	1530
	Initial	ART	ART	ART	ART	ART	ART	ART	ART	ART	ART	ART	ART	ART	ART	ART	ART
4:01 A to 12 Mid	Time	1600	1630	1715	1745	1808	1837	1910	1945	2000	2032	2100	2130	2200	2238	2305	2335
	Initial	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG	RG
Supervisor Checks	Time	0900															
	Name	Sgt. C. Lopez															

NOTE: Record "Cell Block Activities" (State Authorized Officer or Viewing Prohibited)

Plaintiffs' MSJ Appx. 5404

OIG- Martone 1609

HUI OFFENDER SIGN IN/ SIGN OUT LOG

DATE	OFFENDER NAME	TDCJ#	HOUSING	DESTINATION	TIME IN	TIME OUT	OFFICER
8-8-11	Shoemaker	803467	A5-8T	CID	1350	1405	Darby
8-8-11	Smith	1360351	J2-11T	CID	1356	1405	Darby
8-8-11	Nguyen	1583324	J2-19B	CID	1406	1420	Darby
8-8-11	Simpson	559013	D2-16A	CID	1406	1421	Darby
8-8-11	Chenham	675400	K2-2B	CID	1407	1420	Darby
8-8-11	Morales	1249660	E2-18T	CID	1410	1421	Darby
8-8-11	McKAY	622192	B2-7B	CID	1411	1420	Darby
8-8-11	Ortiz	679924	I1-7T	CID	1411	1422	Darby
8-8-11	Phillips	1654006	A3-5T	CID	1415	1422	Darby
8-8-11	Rogers	484719	B1-17T	CID	1420	1424	Darby
8-8-11	Rogers	1653911	F2-23B	CID	1424	1426	Darby
8-8-11	Lawman	1516271	Q10-9B	CID	1425	1444	Darby
8-8-11	Peterson	1655276	B-3-9	CID	1430	1440	Darby
8-8-11	Hernandez	114853	H-5	Nurse	1446	1530	Darby
8-8-11	Quinn	430339	D3-12B	Nurse	1505	1535	Darby
8-8-11	Peterson	126624	I2-15T	DOT	1506	1518	Darby
8-8-11	Corbajal	1248161	J1-15B	DOT	1507	1530	Darby
8-8-11	Lempar	1284244	F1-9	Nurse	1520	1545	Darby
8-8-11	McCulley	1573041	I1-5	Nurse	1550	1552	Darby
8-8-11	Santiago	1661591	K2-17B	Nurse	1555	1645	Darby
8-8-11	Garcia	1358420	J1-4T	DOT	1555	1645	Darby
8-8-11	Schmidt	1534878	H2-2B	DOT	1555	1645	Darby
8-8-11	Labra	1453749	G1-3B	DOT	1555	1645	Darby
8-8-11	Lowe	1711896	P1-13B	Insulin	1650	1859	Darby
8-8-11	Alvarez	1723408	E1-18	Meals	1710	1800	Darby
8-8-11	Huff	1658722	O2-9B	Insulin	1729	1735	Darby
8-8-11	Williams	1478922	O2-4B	Insulin	1729	1735	Darby
8-8-11	Randall	679486	O1-6	Insulin	1729	1735	Darby
8-8-11	Garcia	1631937	O1-7	Insulin	1729	1735	Darby
8-8-11	Belmarcoz	1636567	M1-23	Insulin	1800	1827	Darby
8-8-11	Venzant	1441050	M2-22B	Insulin	1800	1828	Darby
8-8-11	Hoy	1607105	M1-5B	Insulin	1800	1810	Darby
8-8-11	Daniels	1464522	M1-17B	Insulin	1801	1810	Darby
8-8-11	Hinds	1633179	M1-7B	Insulin	1801	1810	Darby
8-8-11	Smith	606753	M1-4B	Insulin	1802	1815	Darby
8-8-11	Lore	1653336	M2-5B	Insulin	1802	1824	Darby
8-8-11	Petersen	1427571	M1-8B	Insulin	1803	1820	Darby
8-8-11	Rocha	152495	M1-21B	Insulin	1803	1824	Darby
8-8-11	Shoppard	1086327	M1-23B	Insulin	1804	1830	Darby
8-8-11	Shorts	1638689	M2-4B	Insulin	1804	1830	Darby
8-8-11	Martone	1395315	E1-4	Insulin	1821	1845	Darby

Per Warden Lewis this log is to be turned in at the end of each day

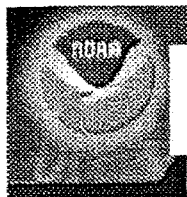
TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Temperature Log

Unit: Huntsville

mon 8-8-11

Date:	Outside Air Temperature	Humidity or Wind Speed	Heat Index or Wind Chill	Person Recording
6:30 a.m.	81°	75%	85°	Gambrell
7:30 a.m.	84.0	71%	85	Greene
8:30 a.m.	86.4	65%	90	Greene
9:30 a.m.	87.4	51%	90	Greene
10:30 a.m.	93.0	46%	93	Greene
11:30 a.m.	95.2	40%	101	Greene
12:30 p.m.	97.2	35%	96°	Gambrell
1:30 a.m.	100.6	25%	99	Greene
2:30 p.m.	101.7	20%	99	Greene
3:30 p.m.	104.4	20%	103	Greene
4:30 p.m.	104.4	20%	** 105	B. Thomas
5:30 p.m.	105.3	20%	** 105	B. Thomas
6:30 p.m.	102.9	20%	99	B. Thomas

www.srh.noaa.gov



Weather observations for the past three days

Huntsville Municipal Airport

Enter Your "City, ST" or zip code

Go

en español



Date	Time (cdt)	Wind (mph)	Vis. (mi.)	Weather	Sky Cond.	Temperature (°F)		6 hour		Pressure		Precipitation (in.)		
						Air	Dwpt	Max.	Min.	altimeter (in.)	sea level (mb)	1 hr	3 hr	6 hr
09	07:53	S 8	10.00	Mostly Cloudy	BKN008	80	77			29.87	1010.9			
09	06:53	S 9	10.00	A Few Clouds	FEW020	79	76	82	79	29.85	1010.1			
09	05:53	SW 3	10.00	Overcast	FEW013 OVC022	80	76			29.85	1010.1			
09	04:53	S 5	10.00	Mostly Cloudy	BKN013	80	76			29.84	1009.9			
09	03:53	S 8	10.00	Fair	CLR	81	76			29.84	1009.8			
09	02:53	S 13 G 20	10.00	A Few Clouds	FEW017	82	76			29.85	1010.0			
09	01:53	S 12	10.00	Fair	CLR	82	75			29.85	1010.0			
09	00:53	S 12 G 18	10.00	Fair	CLR	84	73	101	84	29.85	1010.1			
08	23:53	S 12	10.00	Fair	CLR	85	72			29.83	1009.5			
08	22:53	S 14 G 23	10.00	Fair	CLR	88	71			29.82	1009.0			
08	21:53	S 12 G 22	10.00	Fair	CLR	91	69			29.78	1007.7			
08	20:53	S 9	10.00	Fair	CLR	95	65			29.76	1007.1			
08	19:53	S 12 G 17	10.00	Fair	CLR	98	64			29.75	1006.8			
08	18:53	S 10 G 21	10.00	Fair	CLR	101	64	104	96	29.75	1006.7			
08	17:53	S 7 G 16	10.00	A Few Clouds	FEW085	102	64			29.76	1006.9			
08	16:53	S 5 G 20	10.00	A Few Clouds	FEW080	103	63			29.76	1007.2			
08	15:53	S 10 G 20	10.00	Partly Cloudy	SCT080	102	64			29.79	1007.9			
08	14:53	S 10 G 16	10.00	Fair	CLR	101	64			29.81	1008.9			
08	13:53	SW 10 G 20	10.00	Fair	CLR	99	66			29.85	1010.0			
08	12:53	S 12 G 18	10.00	A Few Clouds	FEW055	97	68	97	79	29.87	1010.8			
08	11:53	SW 9 G 18	10.00	Partly Cloudy	SCT048	95	70			29.90	1011.9			
08	10:53	SW 8 G 20	10.00	A Few Clouds	FEW034	91	72			29.91	1012.3			
08	09:53	S 14 G 21	10.00	A Few Clouds	FEW027	88	74			29.91	1012.2			
08	08:53	S 10	10.00	Mostly Cloudy	BKN015	85	76			29.92	1012.3			
08	07:53	S 8	10.00	A Few Clouds	FEW022	81	76			29.90	1012.0			
08	06:53	S 7	10.00	A Few Clouds	FEW014	79	76	85	79	29.89	1011.6			
08	05:53	S 6	10.00	Fair	CLR	80	76			29.90	1011.7			
08	04:53	S 6	10.00	Fair	CLR	81	76			29.88	1011.2			
08	03:53	S 8	10.00	Partly Cloudy	SCT015	81	76			29.88	1011.1			
08	02:53	S 10 G 17	10.00	Fair	CLR	82	75			29.88	1011.1			
08	01:53	S 13 G 21	10.00	Fair	CLR	83	73			29.89	1011.3			
08	00:53	S 9	10.00	Fair	CLR	85	71	101	85	29.88	1011.2			
07	23:53	S 10	10.00	Fair	CLR	88	72			29.88	1011.1			

19